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- TOURNAN, I. *Le régime de l'alcool, sa réforme nécessaire.* (Paris: Dunod & Pinat. 1916. Pp. 492. 9 fr.)
- WHEELER, W. B. *Federal and state laws relating to intoxicating liquor.* (Westerville, O.: American Issue Pub. Co. 1916. Pp. 96. 25.)
- WILSON, L. A. *A list of helpful publications concerning vocational instruction.* (Albany: N. Y. State Univ. 1915. Pp. 52.)
- Among industrial workers (ways and means) a hand book for associations in industrial fields.* (New York: Y. M. C. A., Indus. Dept. 1916. Pp. 118. 50c.)
- First annual report of the Department of Public Welfare, 1915-1916.* (Dallas, Texas: Dept. Public Welfare. 1916. Pp. 88.)  
Reports the operations of the employment bureau.
- International Health Commission, second annual report, January 1, 1915-December 31, 1915.* (New York: The Commission, 61 Broadway. 1916. Pp. 204.)
- The progress of housing reform in Brooklyn.* (Brooklyn: Tenement House Committee. 1916. Pp. 47.)
- Prostitution: the moral bearings of the problem.* (London: King. 1916. 2s.)
- Report of the advisory committee on proposals for the state purchase of the licensed liquor trade.* (London: Wyman. 1916. 1d.)
- Rural school sanitation including physical and mental status of school children in Porter County, Indiana.* U. S. Public Health Bulletin no. 77. (Washington: Public Health Service. 1916. Pp. 127.)
- School nurse.* Bulletin of the Russell Sage Foundation Library. (New York: Russell Sage Foundation. 1916.)
- A tabular statement of infant-welfare work by public and private agencies in the United States.* Infant mortality series, no. 5. (Washington: Children's Bureau. 1916. Pp. 114.)
- Statistiques annuelles des établissements pénitentiaires et des institutions d'assistance, année 1915.* Printed in English and French together. (Quebec: Bureau of Statistics, Dept. of Provincial Secretary. 1916. Pp. 133.)

### Insurance and Pensions

- United States Life Tables, 1910.* Prepared under the supervision of JAMES W. GLOVER. (Washington: Bureau of the Census. 1916. Pp. 65.)

American economists will welcome as a publication of the first importance a recent volume of the Census Bureau entitled *United States Life Tables*. This volume makes at once available the essential data on the average length of life of the several classes

of the community, and more especially in the Eastern and industrial sections of the country. For the first time in our national history, facts have been compiled which are as authoritative as those which have long been available for the advanced European countries. The government has recognized the importance of its human resources, and has taken the first step in a national campaign for life conservation.

A few American life tables have previously been compiled from insurance experience. The federal government has also published from time to time life tables for the larger cities, but these have no scientific or actuarial value. Professor Glover's connection with the present venture guarantees an absolutely sound actuarial basis for this work. Yet with all of their technical excellence these tables have been prepared with an eye to the widest public use. Their arrangement is extremely simple, following a very natural sequence from the more general to the more specific groups. The explanations are detailed, are non-technical in character, and are illustrated with examples. Public health officials, students of vital statistics, physicians, sociologists, economists, and all persons interested in the public health movement of America will find the tables a valuable reference source. The Census Bureau, Professor Glover, and the country at large are all to be congratulated on the highly successful outcome of this important scientific work.

The tables are based on the census enumeration of 1910 and the mortality returns of the three years 1909, 1910, and 1911 for the ten original registration states and the District of Columbia. There are in all twenty-five life tables. The first is for both sexes in the original registration states; the next fourteen are for males and females respectively in the following seven classes of the population: aggregate, white, negro, native white, foreign white, cities, and rural. The last ten tables are for males and females respectively in five states—Indiana, Massachusetts, Michigan, New Jersey, and New York.

The first table is probably the most important, being based on the largest exposure, namely 24,000,000 enumerated lives and 1,000,000 reported deaths. According to this table the average expectation of life of persons in these registration states is, at birth, about 51 years. For a man, the average is a little under 50 years and for a woman it is 53 years. The tables make no attempt to explain these differences but if an explanation is allowable it may be pointed out that men are the more exposed to death

from homicide, suicide, and the accidents that occur in industry. Women are largely free from these violences. The female sex has also a lower mortality rate in infancy, which is, indeed, continued year for year throughout life.

Later tables indicate that the whites have a longer average life span than the colored; at birth it is 16 years greater. It is also greater at various points throughout life. Thus, at age 25 the average white man may expect to survive 38.8 years while the colored man at the same age has only 30.4 years left to him. So, too, a white woman at 25 may expect to live 40.9 years while a colored woman has eight years less. These differences are important since they affect adult life when every additional year counts for usefulness to the individual and society.

The tables also show the difference in average life span between native and foreign born persons. The native born whites of both sexes enjoy very decided advantages in life expectation over the foreign born whites at the same ages. More important, perhaps, is the difference shown in the expectation of life of those living in the cities as compared with those living in the country. The average white man living in the rural districts has nearly eight years more of life than if born in the city. The expectation of life of white women living in the country, is also increased over their city sisters, but only by six years. This condition is undoubtedly related to the fact that the rural population is less subject to tuberculosis, pneumonia, Bright's disease, and the diseases of the digestive system. The differences in the race composition of the rural and urban populations should also be kept in mind. The cities contain a large proportion of foreign born; the rural areas are more American in their composition. As the writer recently showed in this journal,<sup>1</sup> this factor plays an important part in determining death rates and incidentally the average expectation of life. For the same reason great caution is required in making comparisons of the life expectations in such states as New York and Massachusetts on the one hand with Indiana and Michigan on the other. The latter states are composed largely of persons of native stock, the former contain a large proportion of foreign born.

Reference may be made to a source of error which affects the tables somewhat. The registration of deaths, even as late as 1910,

<sup>1</sup> "Factors in American Mortality," *AMERICAN ECONOMIC REVIEW*, vol. VI, no. 3 (Sept., 1916), p. 523.

was not perfect, and defects were especially marked in the rural areas of the states. Such under-registration has the effect of decreasing the death rates and conversely increasing the expectation of life for the areas in question. It is possible that this factor plays a part in the difference noted above between the expectation of life in rural and urban populations.

An excellent beginning has been made. It is to be hoped that the plans for the 1920 federal census will make provision for a continuation of Professor Glover's work and that we may have authentic life tables for the same and additional registration states for 1920. Comparisons with the earlier tables will prove valuable in many ways. They will indicate the progress in life conservation made in the decade; they will throw light on the effectiveness of our several health programs, especially with reference to infant mortality; and they will, perhaps, decide the moot question as to whether the suspected increase in our mortality after 45 is fact or fancy.

LOUIS I. DUBLIN.

*Metropolitan Life Insurance Company.*

*Standards of Health Insurance.* By I. M. RUBINOW. (New York: Henry Holt and Company. 1916. Pp. 322. \$1.50.)

It would be well if every new effort for social reform could be accompanied by so useful a popular presentation of its nature as this volume of Dr. Rubinow's, which describes the elements of health insurance and untangles many of its complexities. To the thoughtful layman it will serve to make explicit the difficulties of a complex theme and so to give a basis for intelligent judgment. Herein lies its function rather than in any contribution to the theory of social insurance. It is, in addition, an appeal for the new legislation addressed to novices and to the skeptical.

A chapter on the principle of compulsion is followed by chapters on scope and extent. These grow out of the developments in Europe. The recommendation appears that the medical service of accident compensation in our American states should be taken over by the corresponding service under health insurance. This recommendation can be warmly seconded. The cost of specific occupational diseases, it is proposed, should fall to the accident compensation system. But this demands drawing a line of demarcation, which must be more or less arbitrary, and makes for difficulties which the German system is fortunate in avoiding. In-